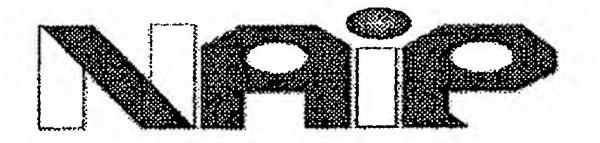
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Art Unit: 2813

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From: Winston Hsu, Registration No. 41,526

Serial No.: 10/710,505

Attorney Docket No.: NAUP0555USA

Subject: Response to the Office Action mailed on 8/8/2005

Total Pages: 9 pages (including cover page)

Winston Hsu 10/4/2005

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		Application Number	10/710),505			
TRANSMITTAL		Filing Date	07/16/	2004			
FORM		First Named Inventor	Yi-Tyn	g Wu			
		Art Unit	2813		•		
(to be used for all correspondence after initia	d filing)	Examiner Name	HARR	ISON,	MC	NICA D	
Total Number of Pages in This Submission	8	Attorney Docket Number	NAUP0555USA				
ENCLOSURES (Check all that apply)							
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts	Licensing-related		n Vddress	Other Enclosure(s) (please Identify below):			
under 37 CFR 1.52 or 1.53							
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Date 10/4/2005	10/4/2005 Reg. No. 41,526					41,526	
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Application Number

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Effective on 12/08/2004.	Complete if Known							
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	0/710,505						
FEE TRANSMITTAL	Filing Date	07/16/2004						
For FY 2005	First Named Inventor	Yi-Tyng Wu						
	Examiner Name	HARRISON, MONICA D						
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2813						
TOTAL AMOUNT OF PAYMENT (\$) 0.00	Attorney Docket No.	NAUP0555USA						
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 50-3105 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments Credit any overpayments								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION								
Small Entity	Small Entity	/INATION FEES Small Entity (\$) Fee (\$) Fees Paid (\$)						
Application Type Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500		178 183						
Design 200 100 100	50 130	7-						
Plant 200 100 300	150 160							
Reissue 300 150 500	250 600							
Provisional 200 100 0 0 0 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims								
Total Claims		(\$) Fee Paid (\$)						
HP = highest number of total claims paid for, if greater than 20 Indep. Claims								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) -100 = /50 = (round up to a whole number) x								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other:								

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Registration No.

(Attorney/Agent)

41,526

Telephone 302-729-1562

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METHOD FOR FABRICATING A MASK ROM

Appl. No.

: 10/710,505

Confirmation No. 4504

Applicant

: Yi-Tyng Wu

Filed

: July 16, 2004

TC/A.U.

: 2813

Examiner

: HARRISON, MONICA D

Docket No.

: NAUPO555USAO

Customer No.: 27765

Commissioner for Patents

P.O. Box 1450

Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office action of August 08, 2005, please amend the above-identified 5 application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

10